

BUSINESS CONTACT INFORMATION (Bold fields are required)

Customer's Legal Company Name:		
DBA:	DUNS#	
Tax Exempt: (Exemption documents must be attached/provided for states you will ship into)		
Billing Address:		
City:	State:	Zip Code:
Phone:	Owner's Name:	
Ship to Address (if different from Billing):		
City:	State:	Zip Code:
Company Website Address:		
A/P Contact Name:	A/P Email:	A/P Phone:
Federal Tax ID #:	Date Business Started:	
Type of Business:	State of Incorporation:	
Payment Terms:		Net Terms credit line requested \$:

BANKING INFORMATION (Only if requesting Net Terms)

Bank Name:	Phone:	
Bank Address:	Fax:	
City:	State:	Zip Code:
Bank Contact:	Title:	
Bank Account Number(s):		

SIGNATURE

- Customer agrees to make all payments within the agreed upon terms with Rimage if approved for net terms.
- Customer hereby releases credit and/or financial information to Rimage or its assignees.
- Customer agrees to the Terms and Conditions of Sale of Rimage located at www.rimage.com/legal, which govern all purchases from Rimage. Rimage specifically rejects and Customer specifically disclaims any different or additional terms or conditions in any Customer purchase orders, including any associated forms and/or documents.

Authorized Signature:	Date:
Print Name:	Title: